



MONTANA DEPARTMENT OF LABOR & INDUSTRY VERIFICATION REQUEST

Official verification reports are provided to another state licensing board, jurisdiction, or individual for licensure confirmation status in the State of Montana. A fee of \$20 must accompany this request. Once received, the verification will be completed within five (5) business days. Please complete the following:

LICENSING BOARD OR PROGRAM VERIFICATION IS REQUESTED FROM: (Select only one)

Board of Architects	Board of Landscape Architects
Athletic Agents Program	Board of Outfitters
Board of Athletics	Board of Plumbers
Board of Barbers & Cosmetologists	Board of Professional Engineers & Professional Land Surveyors
Boiler Operator Program	Board of Public Accountants
Construction Blaster Program	Board of Realty Regulation
Crane Operator Program	Board of Real Estate Appraisers
State Electrical Board	Board of Sanitarians
Elevator Contractor, Mechanics & Inspection Program	Board of Private Security, Patrol Officers & Investigators
Fire Protection Program	

Name:

License Number:

License Type:

Date of Birth:

(i.e., Architect, Cosmetologist, Electrician, Outfitter etc.)

Preferred Mailing Address:

PO BOX # OR STREET ADDRESS, CITY, STATE OR PROVINCE, ZIP OR POSTAL CODE & COUNTRY

Yes No Is this a change of address? Please note that a change of address for the Board of Realty Regulation, Board of Real Estate Appraisers, or Board of Private Security, Patrol Officers & Investigators (Business Only) need to be done on a separate form.

SEND COMPLETED VERIFICATION TO: (If different than above)

Name:

Address:

City:

State or Province:

Zip or Postal Code:

Country:

Please mail this completed request with \$20 fee made out to the appropriate Board or Licensing Program to:

(Name of Board or Licensing Program)
PO BOX 200513
HELENA MT 59620-0513